

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	COR.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3						
4	/					
5						
6	/					
7						
8	/					
9						
10	/					
11						
12	/					
13	/					
14	/					
15	/					
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44	/					
45						
46						
47						
48						
49						
50						
TOTAL IND.	11		↓		↓	
TOTAL DEP.	33		↓		↓	
TOTAL CLAIMS	44					

	*	*	*	*
	IND.	DEP.	IND.	DEP.
51				
52				
53				
54				
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94				
95				
96				
97				
98				
99				
100				
TOTAL IND.		↓		
TOTAL DEP.		↓		
TOTAL CLAIMS		↓		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS